

ACKNOWLEDGEMENT OF NOTIFICATION OF HAZARDOUS WASTE ACTIVITY

06/13/2011

This is to acknowledge that you have filed a Notification of Hazardous Waste Activity for the installation located at the address shown in the box below to comply with Section 3010 of the Resource Conservation and Recovery Act (RCRA). Your EPA Identification Number for that installation appears in the box below. The EPA Identification Number must be included on all shipping manifests for transporting hazardous wastes; on all Annual Reports that generators of hazardous waste, and owners and operators of hazardous waste treatment, storage and disposal facilities must file with EPA; on all applications for a Federal Hazardous Waste Permit; and other hazardous waste management reports and documents required under Subtitle C of RCRA.

EPA I.D. NUMBER:

NYR000131920

INSTALLATION NAME:

AMNEAL PHARMACEUTICALS OF NY LLC

INSTALLATION ADDRESS:

50 HORSEBLOCK RD BROOKHAVEN, NY 11719

MAILING ADDRESS:

50 HORSEBLOCK RD BROOKHAVEN, NY 11719

EPA Form 8700-12AB (4-80)

USEPA - REGION 2 RCRA Programs Branch 290 Broadway, 22nd Floor New York, NY 10007-1866

ATTN: RCRA NOTIFICATIONS

Tel: (212) 637-4106 Fax: (212) 637-4437

TO: AMNEAL PHARMACEUTICALS OF NY LLC

or Current Occupant

ATTN: ELIZABETH SEETHARAM

50 HORSEBLOCK RD BROOKHAVEN, NY 11719

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SEND COMPLETED

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)	The	AM 10: Appropriate te or Regional ce.	RCRA SUBTITLE C SITE IDENTIFICATION FORM RCRA PROGRAMS BRANCH					
\		Reason for Submittal	Reason for Submittal: To provide an Initial Notification (first time submitting site identification information / to obtain an EPA ID number for this location)					
	-	MARK ALL	To provide a Subsequent Notification (to update site identification information for this location)					
	В	OX(ES) THAT APPLY	As a component of a First RCRA Hazardous Waste Part A Permit Application					
-			As a component of a Revised RCRA Hazardous Waste Part A Permit Application (Amendment #)					
	2		As a component of the Hazardous Waste Report (If marked, see sub-bullet below)					
			☐Site was a TSD facility and/or generator of ≥1,000 kg of hazardous waste, >1 kg of acute hazardous waste, or >100 kg of acute hazardous waste spill cleanup in one or more months of the report year (or State equivalent LQG regulations)					
		Site EPA ID Number	EPA ID Number [N Y R][0 0 0] 1 3 1][9 2 0]					
	3.	Site Name	Name: AMNEAL PHARMACEUTICALS OF NY, LLC					
2		Site Location	Street Address: 50 HORSEBLOCK ROAD					
1		Information	City, Town, or Village: BROOKHAVEN County: SUFFOLK					
			State: NY Country: USA Zip Code: 11719					
	5.	Site Land Type	☑ Private ☐ County ☐ District ☐ Federal ☐ Tribal ☐ Municipal ☐ State ☐ Other					
6. NAICS Code(s) A. 3 2 5 4 1 2 C.		NAICS Code(s) for the Site						
		(at least 5-digit codes)	B D					
		Site Mailing	Street or P.O. Box: 50 HORSEBLOCK ROAD					
		Address	City, Town, or Village: BROOKHAVEN					
			State: NY Country: USA Zip Code: 11719					
			First Name: ELIZABETH MI: T Last: SEETHARAM					
		Person	Title: JR VALIDATION ENGINEER					
			Street or P.O. Box: 50 HORSEBLOCK ROAD					
_			City, Town or Village: BROOKHAVEN					
1			State: NY Country: USA Zip Code: 11719					
			Email: elizabeth2@amneal.com					
			Phone: 631 952 0214 Ext.: 223 Fax: 631 775 2511					
1		Legal Owner and Operator	A. Name of Site's Legal Owner: HOTEL CIRCLE PARTNERS LLC Date Became 06/23/2008 Owner:					
	of the Site		Owner Type: Private County District Federal Tribal Municipal State Other					
1			Street or P.O. Box: 620 NEWPORT CENTER DRIVE					
			City, Town, or Village: NEWPORT BEACH Phone:					
			State: CA Country: USA Zip Code: 92660					
			B. Name of Site's Operator: P.KUMARIDURAIVAN Date Became 06/23/2008 Operator:					
			Operator Type: ■ Private □ County □ District □ Federal □ Tribal □ Municipal □ State □ Other					

OMB#: 2050-0024; Expires 11/30/2011

 Type of Regulated Waste Activity (at your site) Mark "Yes" or "No" for all <u>current</u> activities (as of the date submitting the form); complete any additional boxes as instructed. 						
A. Hazardo	us Was	ste Activitie	es; Complete all parts 1-7.			
YND			f Hazardous Waste rk only one of the following –	a, b, or c.	Y ☑ N ☒ 2. Transporter of Hazardous Waste If "Yes", mark all that apply.	
	х а.	LQG:	Generates, in any calendar mo (2,200 lbs./mo.) or more of haz Generates, in any calendar mo accumulates at any time, more lbs./mo) of acute hazardous was Generates, in any calendar mo accumulates at any time, more (220 lbs./mo) of acute hazardo material.	cardous waste; or onth, or than 1 kg/mo (2.2 aste; or onth, or than 100 kg/mo		 a. Transporter b. Transfer Facility (at your site) 3. Treater, Storer, or Disposer of Hazardous Waste Note: A hazardous waste permit is required for these activities. 4. Recycler of Hazardous Waste
	□ b.	SQG:	100 to 1,000 kg/mo (220 – 2,20 acute hazardous waste.	00 lbs./mo) of non-		
			Y 🗖 N 🛭	5. Exempt Boiler and/or Industrial Furnace If "Yes", mark all that apply. a. Small Quantity On-site Burner		
Y 🗆 N 🗖	 If "Yes" above, indicate other generator activities. N			Exemptionb. Smelting, Melting, and Refining Furnace Exemption		
Y \square N \square	e.	United Sta	ates Importer of Hazardous Waste		YDND	6. Underground Injection Control
Y N n f. Mixed Waste (hazardous and radioactive) Generator		Y 🗆 N 🛭	▼ 7. Receives Hazardous Waste from Off-site			
B. Universa	l Wast	e Activities	s; Complete all parts 1-2.		C. Used	Oil Activities; Complete all parts 1-4.
Υ□ И[☑ 1.	accumula regulation types of u	antity Handler of Universal W te 5,000 kg or more) [refer to ns to determine what is regula Iniversal waste managed at y hat apply.	your State ated]. Indicate	Y 🗖 N 🖪	 1. Used Oil Transporter If "Yes", mark all that apply. a. Transporter b. Transfer Facility (at your site)
Y □ N [× 2.	d. Lamps e. Other (a g. Other (a Destination	des y containing equipment specify) specify) specify) on Facility for Universal Waste			2. Used Oil Processor and/or Re-refiner If "Yes", mark all that apply. a. Processor b. Re-refiner 3. Off-Specification Used Oil Burner 4. Used Oil Fuel Marketer If "Yes", mark all that apply. a. Marketer Who Directs Shipment of
		Note: A hactivity.	azardous waste permit may be	required for this		Off-Specification Used Oil to Off-Specification Used Oil Burner b. Marketer Who First Claims the Used Oil Meets the Specifications

EPA ID Number [N|Y|R][0|0|0][1|3|1][9|2|0]

OMB#: 2050-0024; Expires 11/30/2011

D.	Eligible Academic Entities with Laboratories—Notification for opting into or withdrawing from managing laboratory hazardous wastes pursuant to 40 CFR Part 262 Subpart K						
		You <u>must</u> check with your State to determine if you are eligible to manage laboratory hazardous wastes pursuant to 40 CFR Part 262 Subpart K					
	262 Subpart K						
E	1. Opting into	o or currently operating	ng under 40 CFR Pai	t 262 Subpart K for the	he management of ha	azardous wastes in la	aboratories
	-	em-by-item instruct ege or University	tions for definitions	of types of eligible	academic entities.	mark all that apply:	
		ching Hospital that is	owned by or has a fo	ormal written affiliatio	n agreement with a c	college or university	
	C. Non	-profit Institute that is	owned by or has a f	ormal written affiliatio	n agreement with a	college or university	
	2. Withdrawi	ng from 40 CFR Part	262 Subpart K for th	e management of ha	zardous wastes in lal	ooratories	
11.	Description of	of Hazardous Waste	•				
A.		s for Federally Regu t them in the order the eeded.					
	D001	U123					
	D002						
	D003						
	D004						
	D008						
	D022						
	D038						
	F003						
	F005						
В.	B. Waste Codes for State-Regulated (i.e., non-Federal) Hazardous Wastes. Please list the waste codes of the State-Regulated hazardous wastes handled at your site. List them in the order they are presented in the regulations. Use an additional page if more spaces are needed.						Regulated al page if more

EPA ID Number	3 1 9 2 0	OMB#: 2050-0024; Expires 11/30/2011				
12. Notification of Hazardous Secondary Material (HSM) Activity						
Y N Are you notifying under 40 CFR 260.42 that you will begin managing, are managing, or will stop managing hazardous secondary material under 40 CFR 261.2(a)(2)(ii), 40 CFR 261.4(a)(23), (24), or (25)? If "Yes", you must fill out the Addendum to the Site Identification Form: Notification for Managing Hazardous Secondary						
13. Comments	Material. 13. Comments					
Other Contact Person on the Site						
Rutul Bavaliya						
Validation Technician,						
631 952 0214 x 220 or rutul@amneal.com						
14. Certification. I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fines and imprisonment for knowing violations. For the RCRA Hazardous Waste Part A Permit Application, all owner(s) and operator(s) must sign (see 40 CFR 270.10(b) and 270.11).						
Signature of legal owner, operator, or an authorized representative	Name and Official Title (type or print)	Date Signed (mm/dd/yyyy)				
P- Umalma	FACILITIES MANAGER	04/26/11				
		,				





2011 MAY -4 AM IO: 30 RCRA PROGRAMS BRANCH

Amneal Phamaceuticals of New York, LLC.

Integrated Contingency Plan

Contingency Plan"



Prepared: April 4, 2011



Integrated Contingency Plan

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Integrated Contingency Plan

1.0 Purpose

The following Contingency Plan has been established for Amneal Pharmaceuticals of NY, LLC, located at 50 Horseblock Road, Brookhaven, NY 11719. The purpose of this plan is to minimize hazards to human health or the environment from fires, explosions, or any unplanned sudden or non-sudden release of hazardous waste or hazardous waste constituents into the air, soil, or surface water.

The provisions of this plan are to be carried out immediately in the event of a fire, explosion, or release of hazardous waste or hazardous waste constituents which could pose a threat to human health or the environment. This plan describes the actions to be taken by Amneal personnel when responding to fires, explosions, or any release of hazardous materials.

2.0 Authority

Provided through Title 40 Code of Federal Regulations (CFR) 265.50 through 265.56 (Referenced in 40 CFR 262.34(a)(4).

New York State Department of Environmental Conservation Regulations 6 NYCRR Subpart 373-3.4

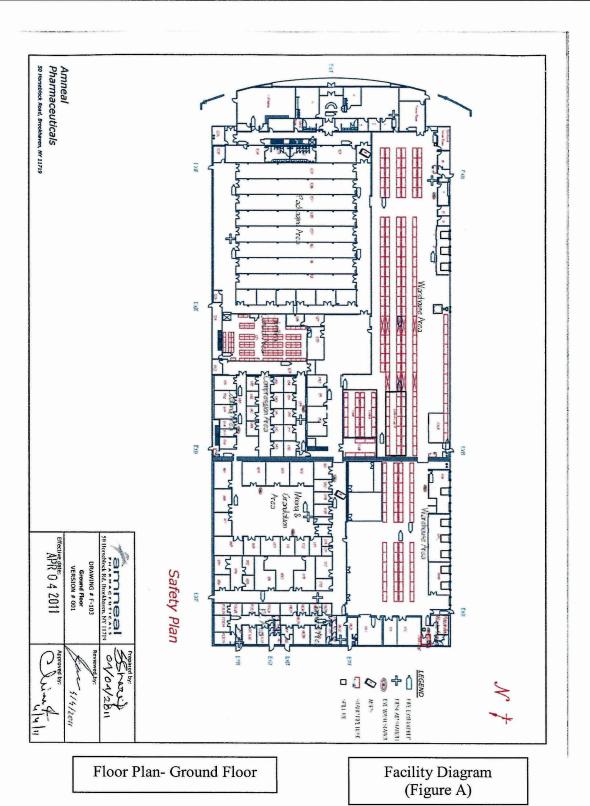
3.0 Facility Description

The Facility is located at 50 Horseblock Road, Brookhaven, NY 11719, in Suffolk County. The physical building is approximately 93,700 thousand square feet and occupies for Commercial/Industrial use. All the areas of property not occupied by the building proper i.e., exposed soil are used for aesthetic landscaping around the building or are paved for parking.

The primary business of the facility is the production of generic pharmaceuticals. Other activities carried-out are staging and warehousing of pharmaceutical ingredients, accumulation of waste solvents used in research and development, and also the cleaning and manufacturing processes.

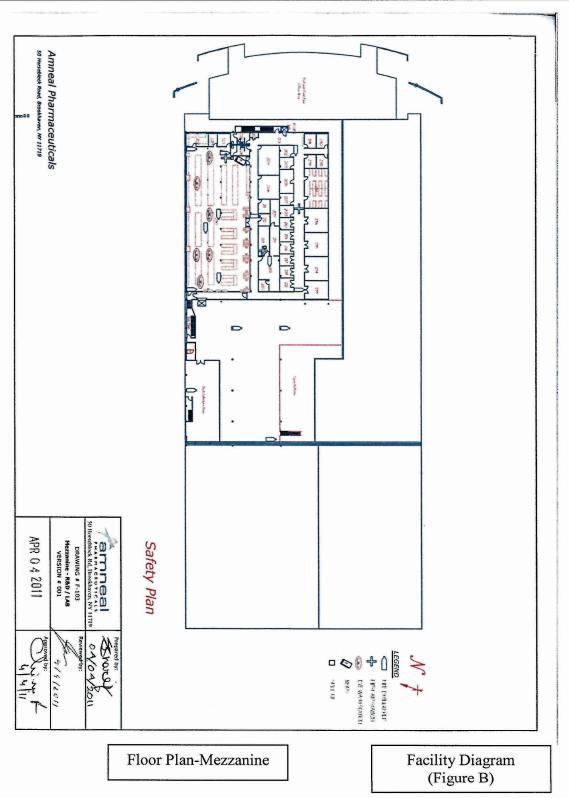
The arrangement of the facility, including the locations of hazardous waste containment areas, as well as storage areas of hazardous materials is shown in the diagrams provided. Amneal has operated this facility since 23rd of June 2008. Amneal's EPA number is NYR000131920. Amneal is the second_operator to require an EPA Identification number for this facility, after Interpharm Inc.





Emergency Call 911







4.0 Hazardous Waste Storage Area and Alcohol Storage area

There is one hazardous waste storage area and one Alcohol storage area are available. The Hazardous Waste Storage Area and the Alcohol storage area are located at the rear of the warehouse.

There are three accesses into the hazardous storage area. One is through the warehouse, the other one is from the production / Softgel area overhead door. The third one is from outside exit door or overhead door on the ramp.

The Hazardous Waste Storage room has the dimensions of 24' x 14' x 8'. There is no electrical source inside the Hazardous waste storage Room. The Room is designed with spill decks to hold 12 x 55 Gal. drums for Hazardous-Waste storage. Part of the Room is allocated to floor paints and unused Florescent Lamps to dispose. The full room has 7 sprinkler heads. All the Hazardous waste storage drums are grounded.

The Alcohol Storage Area has the dimension of 7' x 7' x 8' designated to hold 8 x 55 Gallon drums. There are no electrical sources inside the room. All the room designed with the spill decks.

The entire area is protected by the building sprinkler system which is augmented by fire pumps. Fire extinguisher and eyewash stations are provided close to the hazardous waste storage area and Alcohol storage area. And the emergency telephone is provided on the doors. Spill response supplies are readily available at the in front of the storage areas.

5.0 Storage Cage Operations

The Hazardous Waste Storage Areas serve as the central location for the accumulation of hazardous wastes prior to being picked up for recycling or disposal by a licensed hazardous waste transporter.

Hazardous wastes are generally generated in two ways at Amneal

- 1. As part of Quality Control testing within our laboratories, or
- 2. As a result of designated hazardous waste streams generated by Manufacturing.
- 50 Horseblock Road, Amneal is identified as a Large Quantity Generator of Hazardous Waste. LQG's are facilities that produce 1,000 Kilograms or more per one calendar month of non-acute hazardous waste or generate greater than 1 Kilogram per month of acute hazardous waste.

All personnel performing activities within the Hazardous Waste Storage area shall be trained in and be familiar with the procedures set forth in the Hazardous Waste Management Plan.



(Emergency Dial 911) Integrated Contingency Plan

Emergency Coordinator

As required in 40 CFR 265.55, there will be at least one employee at all times, on the Facility premises, or on call and available to respond to the facility in a short period, in the event of an emergency. The following is a list of personnel designated as Emergency Coordinators who are responsible for coordinating all emergency response measures. These individuals have the authority to commit the necessary resources to carry out the details of this contingency plan.

PRIMARY CONTACT (1)	PRIMARY CONTACT (2)	PRIMARY CONTACT (3)
P. Kumariduraivan	Elizabeth Seetharam	Rutul Bhavaliya
Facilities Engineering	Jr.Validation Engineer	Validation Technician
Manager	865, Broadway Ave, # 21A.	98 Wheeler Rd
9 Laramie CT,	Holbrook, NY 11741	Central Islip, NY 11722
Coram NY 11727	Work: (631) 952-0214 X 223	Work: (631) 952-0214 X 220
Work: (631) 952-0214 X 288	Home: (631) 750 9231	Cell: (646) 249 6634
Cell: (631) 745-3528	Cell: (631) 398 1957	
Secondary Contact (1)	Secondary Contact (2)	Secondary Contact (3)
Radu Oancea	Raj Sutaria	SANJIV PATEL
Director of Engineering	Executive Vice President of	V.P. Global Operations
211 Stuyvesant Avenue	Operation	_
Merrick, NY 11566	2 Shady Lane	
Work: (631) 952-0214 X134	Work: (631) 952-0214 X 110	Work:(631)952-0214 X 178
Home: (516) 684-9553	Home: (516) 692 5190	Cell: (862)262-1601
Cell: (631) 745-3516	Cell: (516) 886 5922	

Each Emergency Coordinator is thoroughly familiar with all aspects of the Contingency Plan, all activities and operations at the facility, the location and characteristics of the waste streams handled, the location of pertinent MSDS's, records, and the facility layout.

The Emergency Coordinator is in charge of all initial actions taken in response to an emergency. The Emergency Coordinator will continue in this lead role until the arrival of an authoritative agency, such as the Brookhaven Fire Department, at which time the Emergency Coordinator will act as a liaison with the designated Incident Commander and Amneal Personnel.



7.0 Emergency Procedures

In order to comply with the applicable regulations and minimize the hazards associated with an emergency situation, the designated Emergency Coordinator shall take the following actions upon discovery of a fire, explosion, or any unplanned, sudden or non-sudden release of hazardous waste or hazardous waste constituents to air, soil, or surface water at the facility.

- Small chemical spills will be addressed by the spill response team (Figure D). The Facility Engineering Manager x 288 or Jr. Validation Engineer x 223 or validation Technician x 220 will be called to act as Spill Response Coordinator. The response team will be notified to respond to the spill area, with PPE and the spill kit. A plan to contain and clean up the spill will be developed. Once the spill has been addressed all spill materials will be bagged, tagged and disposed of as hazardous waste. The spill kit shall be re-supplied.
- In the event of a chemical spill deemed to large for an effective clean-up by the spill response team, the spill clean-up contractor (Veolia) listed in (Figure C) shall be called in and all proper notifications shall be made.
- In the event of a large chemical spill, fire, or explosion the Emergency Coordinator will activate an emergency response by calling 911 and/or the local Fire Department (Figure C). The Facility alarm and communication systems shall be used to initiate an evacuation of the facility.
 - 1. Immediately try to identify the character, exact source, amount, and extent of any released materials by observation, facility records or manifests, etc.
 - 2. Assess possible health or environmental hazards that may result from the release, fire, or explosion. Both direct and indirect effects.
 - 3. If human health or the environment is threatened immediately notify the arriving Fire and Police personnel and assist in any evacuation deemed necessary.
 - 4. Notify the National Response Center (Figure C) at (800) 424-8802
 - Give your name and phone number
 - The name and address of the facility
 - Time and type of incident (e.g., release, fire)
 - Name and quantity of material involved, to the extent known
 - The extent of any injuries
 - The possible hazards to health or environment that may be present.



- 5. During any emergency the Emergency Coordinator will take all reasonable measures necessary to ensure that fires, explosions, and releases do not occur, recur, or spread to other areas of the facility. These measures must include stopping processes, collecting and containing released wastes, and removing or isolating containers.
- 6. Within 24 hours of an incident that presents a threat to health or the environment outside of the facility, the Emergency Coordinator must notify the NYS Department of Environmental Conservation with all the above information including the scope and magnitude of the problem and any immediate actions that have been taken.
- Immediately after an emergency, the Emergency Coordinator will provide for treating, storing, or disposing of recovered waste, contained soils, or surface water, or any other material that results from a release, fire, or explosion at the facility. It should be noted that this waste should be handled according to applicable hazardous waste requirements. The Emergency Coordinator must also ensure that no waste that may be incompatible with the released material is treated, stored, or disposed of until clean-up procedures are completed. Also, he/she must ensure that all emergency equipment used is cleaned, restocked and rendered fit for its intended use.
- Post-response the Emergency Coordinator must notify the Administrators at EPA
 Region II and the NYSDEC that all the appropriate measures described have been
 taken. After which, with the Administrators approval, normal operations can
 resume.
- The Emergency Coordinator must submit a written report within fifteen days on the incident to the EPA Region II and the NYSDEC. This report must contain:
 - Name, address, and telephone number of the owner or operator
 - Name, address, and telephone number of the facility
 - > Date, time, and type of incident (e.g., fire, explosion, etc.)
 - > Name and quantity of materials involved
 - > Extent of any injuries
 - ➤ An assessment of actual or potential hazards to human health or the environment, if applicable.
 - Estimated quantity and disposition or all recovered materials that resulted from the incident.
- The Emergency Coordinator will inspect the Hazardous Waste Storage Area once weekly, and insure the presence and condition of emergency equipment on hand.



Emergency Contact Phone Numbers			
Yaphank Fire Department	(631) 924 3200		
Medford Fire Department	(631) 475 0411		
Brookhaven Memorial Hospital	(631) 654-7100 or 911		
Veolia Environmental Services (Emergency Response)	(516) 221-8300 1-877-818-0087- Emergency response		
Poison Control Hotline	(631) 542-2323		
NYS Department of Environmental Conservation	1-518-457-7362		
National Response Center	1-800-424-8802		
Suffolk County Police Department 7 th Precinct	(631) 852-8700		
Suffolk County Department of Public Works	(631) 852-4010		
Suffolk County Department of Health Services	(631) 853-3000		

(Figure C)

Spill Response Team				
Name	Title	Location	Contact Number	
P. Kumariduraivan	Facilities Engineering Manager	50 Horseblock Rd.	631-952-0214 X 288	
Elizabeth Seetharam	Jr.Validation Engineer	50 Horseblock Rd.	631-952-0214 X 223	
Rutul Bhavaliya	Validation Technician	50 Horseblock Rd.	631-952-0214 X 220	

(Figure D)



Integrated Contingency Plan

8.0 Plan Distribution

A copy of this Contingency Plan and all revisions to the Plan shall be maintained at the main Engineering Office. In addition, a copy has been submitted to the local police department, fire department, hospital, and State and local emergency response teams that may be called upon to respond and provide emergency services. Specifically, this Contingency Plan for Amneal Facility at 50 Horseblock Road, Brookhaven, NY has been provided to the following parties:

Brookhaven, N i has been provided to the	
Plan Dis	tribution
Yaphank Fire Department Matt Quinn, chief of Department 31 main street, Yaphank, NY 11980 Phone – (631) 924 3200	Suffolk County Police Department Inspector Ferrara, Commanding officer 7 th Precinct 1491 Wm. Floyd Pkwy, Shirely, NY 11788 Phone – (631) 854-8478
Brookhaven Memorial Hospital Rebert Murphy , Director of Engineering 101 Hospital Rd Patchogue, NY 11772 Phone – (631) 654-7100	Ms Katy Murphy, NYSDEC Division of Solid & Hazardous Materials SUNY Stony Brook, 50 Circle Road Stony Brook, NY 11790-2356 Phone – (631) 444-0235
Suffolk County DPW Industrial Waste Unit Mr. Vincent A Amendola 335 Yaphank Avenue Yaphank, NY 11980-9608 Phone – (631) 852-4160	Veolia Environmental Services Mr. Bill Sanchez 3001 Burns Avenue Wantagh, NY 11793 Phone – (516) 221-8300 Spill Response – 1 877 818 0087

9.0 Plan Review

This Contingency Plan shall be reviewed annually by the Safety Engineer. The annual review will be documented on a checklist and kept attached to this plan. In the case of revision, an amended copy of the plan will be mailed as per the distribution list with a return response request to indicate receipt of the amended plan. The plan will be revised when:

- Applicable laws, codes, or regulations are changed or revised.
- Plan changes are necessary to reflect current personnel or conditions.
- The Facility is changed which alters the response necessary in an emergency.
- The Plan fails in an emergency.



HAZARDOUS CHEMICAL LIST

Sr. No	Chemical	Hazard Class	Average Quantity in Stock
1	Chloroform	Flam - Liq	16 Liters
2	Cyclohexane	Flam - Liq	12 Liters
3	Methylene Chloride	Flam - Liq	16 liters
4	Ethyl Acetate	Flam - Liq	12 Liters
5	Alcohol	Flam - Liq	8 Liters
6	Tetrahydrofuran	Flam - Liq	12 Liters
7	Dioxane	Flam - Liq	8 Liters
8	Iso-ocatane	Flam - Liq	8 Liters
9	Toluene	Flam - Liq	12 Liters
10	n-Heptane	Flam - Liq	15 Liters
11	1-Propanol	Flam - Liq	2.5 Liters
12	Tert-Butanol, 99.5 %	Flam - Liq	1 Liter
13	Diethyl Ether, Pure	Flam - Liq	10 Liters
14	Acetone	Flam - Liq	12 Liters
15	n-Hexane	Flam - Liq	4 Liters
16	2, 2, 4-Trimethylpentane	Flam - Liq	1 Liter
17	Cyclohexanol	Flam - Liq	8 Liters
18	o-Phosphoric Acid	Corrosive	2.5 Liters
19	Nitric Acid	Corrosive	1 Liter
20	Hydrofluoric	Corrosive	500 mL
21	Sulfuric Acid	Corrosive	2.5 Liters
22	Sulfurous Acid	Corrosive	1 Liter
23	Carbon Disulfide	Corrosive	5 Pints
24	Ammonium Hydroxide	Corrosive	7.5 Liters
25	Hydrochloric Acid	Corrosive	2.5 Liters
26	Trifluoroacetic Acid	Corrosive	3 kg
27	Trifluoroacetic Acid	Corrosive	500 mL
28	Acetic Anhydrous	Corrosive	1000 mL
29	Acetic Acid	Corrosive	1000 mL
30	Mineral Oil, Light	-	4 Liters



10.0 Emergency Equipment

The following is a comprehensive list of all emergency, safety, and spill response equipment located within Amneal facility at 50 Horseblock Road, Brookhaven, NY. The designated locations are given and are also indicated on the Facility Diagram (1st and mezzanine floor). It is also noted that the Facility is protected throughout by an integrated Fire Sprinkler System with fire pump enhancement, and an outside Siamese connection.

- 3 MSDS Stations; Production Gowning Area, Manufacturing and Analytical Laboratory. Also a comprehensive MSDS Folder is located on Amneal Mainframe computer for convenience and ease of access.
- 9 First Aid Stations: Warehouse, Softgel Department, Mixing and Granulation, Compressions, Packaging, QC Laboratory 1st floor, Microbiology Laboratory, Research and Development Area and Facilities Office.
- 4 Portable Eyewash Stations: 2 in warehouse, one in next to the Hazardous Waste Storage area, Micro Laboratories and as well as bottled eye irrigation solutions at all First Aid Stations. One buffer solution station is close to Hazardous Waste Storage area.
- 11 Eyewash station which is connected to the regular water. 6 in the QC Laboratory, 2 in Mixing and Granulation area, one in Compression area, one in Coating area and one in front of the production wash room.
- Approximately **52** Fire Extinguishers located throughout the Facility; Locations are indicated on the Facility Diagram (1st and mezzanine floor)
- 4 Spill Response Kits; Waste Storage Cage, next to electrical room, one QC Laboratory, Micro Laboratory. Contents are:

Spill kits contain Rolls of Absorbent pads, Absorbent spill socks, Absorbent pads, Splash goggles, Nitrile gloves, Emergency Response Guidebook,

MENTAL PROTECTION AGENCY, REGION II

2011 MAY -4 AM 10: 31

BRANCH

ANNUAL CONTINGENCY PLAN REVIEW CHECKLIST

Review conducted by: Elizabeth Seetharam

Date: 04/25/11 Reason: Changes done

Criteria	Yes	No
Regulations governing the scope and extent of this Plan have been revised?		X
Personnel, phone numbers, addresses, or procedures have changed?		X
The facility has changed in design, construction, operation, maintenance, or other circumstances that materially increase the potential for fire, explosion, or release of hazardous wastes?		Х
The facility has changed in its design, construction, operation, maintenance, or other circumstance that changes the response pattern necessary in an emergency?		X
The location, quantity, or characteristics of hazardous chemicals on sight have changed?	X	
The Contingency Plan has failed in an emergency?		X

Summary:

Amneal Pharmaceuticals generates less than 1,000 kg/mo of RCRA or New York State hazardous waste and is presently classified as a Small Quantity Generator (SQG). During 2010, the site generated more than 1,000 kg/mo of hazardous waste, putting the site into the Large Quantity Generator (LQG) status.

FOIA Report of Non-Sensitive Compliance Monitoring and Enforcement Data

Report run on: April 7, 2016 - 4:01 PM Version 5.0

User Selection Criteria

Location:

New York, all activities

Activity Location:

None Chosen

Handler ID:

NYR000131920

Group of IDs:

None Chosen

Handler Name:

Handler Universe:

All Facilities Regardless of Universe

Determined Date Range: From: 10/01/1980 To: 04/07/2016

Location County Code: None Chosen

Evaluation Type:

Location City:

Focus Area:

Location Zip Code:

Violation Type:

State District:

None Chosen

Display Code Descrip.:

Sort Order:

Region, State, Handler Name

Display Universes:

Yes

Results

Data meeting the criteria you selected follows.

Total Pages: 9

Total Handlers:1

Report Description

This report presents available information from the Resource Conservation and Recovery Act Information System (RCRAInfo) about compliance evaluations. violations, and enforcement actions meeting the criteria supplied by the user. Evaluations showing no violations does not always indicate that no violations were determined. Violation without enforcement actions does not always mean no enforcement action will be issued. In order to avoid releasing enforcement sensitive information to the public the following information is not shown on the report: pending civil / judicial referrals, criminal actions and referrals, and State to EPA referrals; all other enforcement actions are released.

Report Information

Name:

cme foia.rdf

Developed by:

EPA Headquarters, Office of Enforcement and Compliance Assurance

Deployed: Last Updated:

June 2006 May 2012

Contact:

rcrainfo.help@epa.gov

Tables Used:

cmecomp3, ccitation3, hreport_univ5, lu_citation, lu_state, hid_groups

Libraries:

none

MNEAL PHARMACEUTICALS	S OF NEW YORK LLC	County Nar	ne / Code: SUFFOLK / NY103		NYR000131920
cation: 50 HORSEBLOCK RD; BRO					REGION 02
ailing: 50 HORSEBLOCK RD; BRO					
tivity Location: NY	State District: NYSDEC R1	Accessibility:	Non-Notifier:	Extract Flag:	Y Active Site: Y
enerator: LQG ort-Term Gen: N	Transporter: N Transfer Facility: N	Operating TSDF: Offsite Receiver:	IC In Place: N HSM:	N	EI Indicator (HE / GW):N / N Subpart K:
Ill Enforcement: A Wrkld: N ctive State Gen: N	Converter: State TSDF:	State Unaddressed SI State Addressed SNC State SNC w/Comp S	: N EPA Addresse	d SNC: N	
	Type: 262.C Ac ype TATE REGULATION	Determined Date: 07/16/2014 tual Compliance Date: 08/25/201 Citation 372.2(a)(8)(ii)	Determined by Agency: \$ 4 RTC Qualifier	State Respo : DOCUMENTED	onsible Agency: State Sequence Number: 15
FCI Evaluation 07/16/2014 Citizen Complaint: YES	Activity Location: NY Multimedia Inspection: NC		entifier: 001 Person: NN Not Subtitle C: NO	'APL Branch: R1 Day Zero: 07/16/2014	Found Violation: YES Focus Area: CC
Enforcement: Activity Location Docket: CA Component: N		gency: State	ction Date: 08/06/2014 Responsible Person: NYAPI Appeal Initiated:		
· · · · · · · · · · · · · · · · · · ·	Type: 262.A Ac ype TATE REGULATION	Determined Date: 10/10/2013 tual Compliance Date: 12/03/201 Citation 372.2(a)(2)	Determined by Agency: § RTC Qualifier	State Respo DOCUMENTED	nsible Agency: State Sequence Number: 5
CEI Evaluation 10/10/2013 Citizen Complaint: NO	Activity Location: NY Multimedia Inspection: NC		entifier: 001 Person: NY Not Subtitle C: NO	APL Branch: R1 Day Zero: 10/10/2013	Found Violation: YES Focus Area:
Enforcement: Activity Location Docket: CA Component: N	•	gency: State	ction Date: 10/31/2013 Responsible Person: NYAPL Appeal Initiated:		
	Type: 265.I Ac /pe TATE REGULATION	Determined Date: 10/10/2013 tual Compliance Date: 10/10/201 Citation 373-3.9(d)(1)	Determined by Agency: § RTC Qualifier	The state of the s	nsible Agency: State Sequence Number: 6
CEI Evaluation 10/10/2013 Citizen Complaint: NO	Activity Location: NY Multimedia Inspection: NC		entifier: 001 Person: NY Not Subtitle C: NO	APL Branch: R1 Day Zero: 10/10/2013	Found Violation: YES Focus Area:
			# D-1 10/04/0040		(
Enforcement: Activity Location Docket:		e: 120 Ao gency: State	ction Date: 10/31/2013 Responsible Person: NYAPL	Identifier: 001 Branch: R1	

^{*} Note: Penalty amount may not reflect all violations cited.

Ciltzen Complaint: NO Multimedia Inspection: NO Sampling: NO Not Subtitle C: NO Day Zero: 10/10/2013 Focus Area: Enforcement: Activity Location: NY Type: 120 Action Date: 10/31/2013 Identifier: 001	olation: Activity Location: NY Scheduled Compliance Date: Citation Information: Seq # Type 3 STA	Actu	etermined Date: 10/10/20 al Compliance Date: 10/1 Citation 372.2(a)(8)(ii)		ed by Agency: State RTC Qualifier: OBSER\		ible Agency: State equence Number: 7
Docket: CA Component: N Disposition Status: AS 12/06/13 Responsible Person: NYAPL Appeal Initiated: Appeal Initiated: Appeal Resolved: Appeal Initiated: Appeal Initiated: Appeal Initiated: Appeal Resolved: Appeal Initiated: Appeal Resolved: Appeal Initiated: Appeal Initiated: Appeal Resolved: Appeal Initiated: Appeal Initiated: Appeal Initiated: Appeal Initiated: Appeal Resolved: Appeal Initiated: Appeal Resolved: Appeal Initiated: Appeal Resolved: Appeal Initiated: Appeal Initiated: Appeal Initiated: Appeal Initiated: Appeal Resolved: Appeal Initiated: Appeal Resolved: Appeal Initiated: Appeal Initiated: Appeal Resolved: Appeal Initiated: Appeal Initiated: Appeal Resolved: Appeal Initiated: Appeal Initiated: Appeal Resolv		-	The state of the s				Found Violation: YES Focus Area:
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Scheduled Compliance Date: Scheduled Compliance Date: Citation Information: Seq # Type	Enforcement: Activity Location: Docket:	NY Type:	120 ncy: State	Action Date: 10/31 Responsible	/2013 Person: NYAPL	Identifier: 001 Branch: R1	METROPO DE PORTUGUISMO EN LOS PARAMENTOS DE PROPERTOS DE PARAMENTOS DE P
Citizen Complaint: NO Multimedia Inspection: NO Sampling: NO Not Subtitle C: NO Day Zero: 10/10/2013 Focus Area: Enforcement: Activity Location: NY Type: 120 Action Date: 10/31/2013 Identifier: 001 Docket: Responsible Person: NYAPL Branch: R1 CA Component: N Disposition Status: AS 12/06/13 Appeal Initiated: Appeal Resolved: Day Zero: 10/10/2013 Identifier: 001 Docket: Responsible Person: NYAPL Branch: R1 Appeal Initiated: Appeal Resolved: Day Zero: 10/10/2013 Identifier: 001 Determined Date: 10/10/2013 Determined by Agency: State Responsible Agency: State Scheduled Compliance Date: Actual Compliance Date: 10/10/2013 RTC Qualifier: DOCUMENTED Sequence Number: 10 Citation Information: Seq # Type Citation	Scheduled Compliance Date: Citation Information: Seq # Type	Actua	al Compliance Date: 12/03 Citation				ALTERIA DE MARIE DE LA CONTRACTOR
Docket: Agency: State Responsible Person: NYAPL Branch: R1 CA Component: N Disposition Status: AS 12/06/13 Appeal Initiated: Appeal Initiated: Appeal Resolved: Diation: Activity Location: NY Type: XXS Determined Date: 10/10/2013 Determined by Agency: State Responsible Agency: State Scheduled Compliance Date: Actual Compliance Date: 10/10/2013 RTC Qualifier: DOCUMENTED Sequence Number: 10 Citation Information: Seq # Type Citation			•				Found Violation: YES Focus Area:
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	Scheduled Compliance Date: Citation Information: Seq # Type	Actua	l Compliance Date: 10/10			Annual Control of the	

^{*} Note: Penalty amount may not reflect all violations cited.

Enforcement: Activity Location: Docket:	: NY	Type: 120 Agency: State	Action Date: 10/31	/2013 Person: NYAPL	Identifier: 001 Branch: R1	
CA Component: N	Disposition Sta	tus: AS 12/06/13	Appeal In			peal Resolved:
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fiolation: Activity Location: NY Scheduled Compliance Date:	Type: 265.D	Determined Date: 10/10/20 Actual Compliance Date: 12/03		ed by Agency: State RTC Qualifier: DOCUM		sible Agency: State Sequence Number: 11
Citation Information: Seq # Typ		Citation	5/2013	NTO Qualifier. DOCOWI	LNIED	Sequence Number. 11
	ATE REGULATION	373-3.4(e)				
CEI Evaluation 10/10/2013	Activity Location: NY	By: State	Identifier: 001	Person: NYAPL	Branch: R1	Found Violation: YES
Citizen Complaint: NO	Multimedia Inspection:		Not Subtitle C		10/10/2013	Focus Area:
Enforcement: Activity Location:	: NY	Гуре: 120	Action Date: 10/31	/2013	Identifier: 001	
Docket:		Agency: State	Responsible I	Person: NYAPL	Branch: R1	
CA Component: N	Disposition Sta	tus: AS 12/06/13	Appeal Ini	itiated:	Ар	peal Resolved:
Scheduled Compliance Date: Citation Information: Seq # Type 8 ST.	oe	Actual Compliance Date: 10/10 Citation 374-3.2(e)	0/2013	RTC Qualifier: OBSERV	/ED	Sequence Number: 12
Citation Information: Seq # Typ 8 ST. CEI Evaluation 10/10/2013	oe ATE REGULATION Activity Location: NY	Citation 374-3.2(e) By: State	Identifier: 001	Person: NYAPL	Branch: R1	Found Violation: YES
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Citation Information: Seq # Typ 8 ST. CEI Evaluation 10/10/2013 Citizen Complaint: NO Enforcement: Activity Location: Docket: CA Component: N	ATE REGULATION Activity Location: NY Multimedia Inspection: NY Disposition State Type: 279.C	Citation 374-3.2(e) By: State NO Sampling: NO Type: 120 Agency: State sus: AS 12/06/13 Determined Date: 10/10/20	Identifier: 001 Not Subtitle C: Action Date: 10/31/ Responsible I Appeal Ini Determine	Person: NYAPL : NO Day Zero: /2013 Person: NYAPL tiated: d by Agency: State	Branch: R1 10/10/2013 Identifier: 001 Branch: R1 App	Found Violation: YES Focus Area: peal Resolved: sible Agency: State
Citation Information: Seq # Typ 8 ST. CEI Evaluation 10/10/2013 Citizen Complaint: NO Enforcement: Activity Location: Docket: CA Component: N fiolation: Activity Location: NY Scheduled Compliance Date:	ATE REGULATION Activity Location: NY Multimedia Inspection: NY Disposition State Type: 279.C	Citation 374-3.2(e) By: State NO Sampling: NO Type: 120 Agency: State sus: AS 12/06/13 Determined Date: 10/10/20 Actual Compliance Date: 10/10/20	Identifier: 001 Not Subtitle C: Action Date: 10/31/ Responsible I Appeal Ini Determine	Person: NYAPL : NO Day Zero: /2013 Person: NYAPL tiated:	Branch: R1 10/10/2013 Identifier: 001 Branch: R1 App	Found Violation: YES Focus Area: peal Resolved:
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^{*} Note: Penalty amount may not reflect all violations cited.

Scheduled Compliance Date: Citation Information: Seq # Type Citation 1 STATE REGULATION 373-3.28(c)(1)(i) CEI Evaluation 05/05/2008 Activity Location: NY By: State Identifier: 001 Person: NYPDL Branch: R1 Found Violation Citation Docket: CA Component: N Disposition Status: Citation Information: Seq # Type Citation Date: 05/09/2008 Activity Location: NY Type: XXS Determined Date: 05/09/2008 Citation Date: 05/09/2008 Citation Date: 05/13/2008 Citation Date: 05/13/2008 Citation Date: 05/13/2008 Citation Date: 05/09/2008 Citation Date: 05/09/2008 Citation Date: 05/09/2008 Citation Information: Seq # Type Citation Information: Seq # Type Citation Date: 05/09/2008 Citation Date: 05/05/2008 Citation Da	14
Citizen Complaint: NO Multimedia Inspection: NO Sampling: NO Not Subtitle C: NO Day Zero: 10/10/2013 Focus Area: Enforcement: Activity Location: NY Type: 120 Agency: State Responsible Person: NYAPL Branch: R1 Docket: Agency: State Responsible Person: NYAPL Branch: R1 Activity Location: NY Disposition Status: AS 12/06/13 Agency: State Responsible Agency: State RTC Qualifier: DOCUMENTED Sequence Number: 4 Citation Information: Seq # Type Citation: NY By: State Identifier: 001 Person: NYPDL Branch: R1 Found Violation: NY Disposition Status: Agency: State Responsible Agency: State RTC Qualifier: DOCUMENTED Sequence Number: 4 Citation Information: Seq # Type Citation: NY By: State Identifier: 001 Person: NYPDL Branch: R1 Found Violation: NO Sampling: NO Not Subtitle C: NO Day Zero: 05/05/2008 Focus Area: Determined Date: 05/05/2008 Determined by Agency: State Responsible Agency: State Responsible Person: NYPDL Branch: R1 Found Violation: NO Sampling: NO Not Subtitle C: NO Day Zero: 05/05/2008 Focus Area: Determined Date: 05/05/2008 Determined by Agency: State Responsible Agency: State Responsible Person: NYPDL Branch: R1 Advivity Location: NY Disposition Status: Actual Compliance Date: 05/05/2008 Determined by Agency: State Responsible Agency: State RC Qualifier: DOCUMENTED Sequence Number: 2 STATE REGULATION 372.2(b)(2)(b) CEI Evaluation 05/05/2008 Activity Location: NY By: State Identifier: 001 Person: NYPDL Branch: R1 Found Violation: Agency: State RC Qualifier: DOCUMENTED Sequence Number: 2 STATE REGULATION 372.2(b)(2)(b) CEI Evaluation 05/05/2008 Activity Location: NY By: State Identifier: 001 Person: NYPDL Branch: R1 Found Violation R1 Person: NYPDL Branch: R1 Found Violation R1 Person: NYPDL Branch: R1 Found Violation R1 Person: NYPDL Branch: R1 Found Violation: NO Bay Zero: 05/05/2008 Pocus Area: Person: NYPDL Branch: R1 Pound Violation: NO Bay Zero: 05/05/2008 Pocus Area: Person: NYPDL Branch: R1 Advivity Location: NY Type: 120 Action Date: 05/13/2008 Person: NYPDL Branch: R1 Agency: State R20/05/2008 Po	
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Docket: CA Component: N Disposition Status: Agency: State Appeal Initiated: Appeal Resolved: Olation: Activity Location: NY Type: XXS Determined Date: 05/05/2008 Actual Compliance Date: 05/09/2008 BRTC Qualifier: DOCUMENTED Sequence Number: 2 Citation Information: Seq # Type Citation 2 STATE REGULATION 372.2(b)(2)(i) CEI Evaluation 05/05/2008 Activity Location: NY By: State Identifier: 001 Person: NYPDL Branch: R1 Found Violation Citizen Complaint: NO Multimedia Inspection: NO Sampling: NO Not Subtitle C: NO Day Zero: 05/05/2008 Focus Area: Enforcement: Activity Location: NY Type: 120 Action Date: 05/13/2008 Enforcement: Activity Location: NY Docket: Agency: State Responsible Person: NYPDL Branch: R1 Found Violation Rotion Date: 05/13/2008 Focus Area: Enforcement: Activity Location: NY Type: 120 Action Date: 05/13/2008 RTC Qualifier: DOCUMENTED Sequence Number: 2 Responsible C: NO Day Zero: 05/05/2008 Focus Area: Enforcement: Activity Location: NY Type: 120 Action Date: 05/13/2008 RTC Qualifier: DOCUMENTED Sequence Number: 2 Responsible Person: NYPDL Branch: R1 Responsible Person: NYPDL Branch: R1 Appeal Resolved: Olation: Activity Location: NY Type: XXS Determined Date: 05/05/2008 Determined by Agency: State Responsible Agency: State	n: YES
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Citizen Complaint: NO Multimedia Inspection: NO Sampling: NO Not Subtitle C: NO Day Zero: 05/05/2008 Focus Area: Enforcement: Activity Location: NY Type: 120 Action Date: 05/13/2008 Identifier: 001 Docket: Responsible Person: NYPDL Branch: R1 CA Component: N Disposition Status: Appeal Initiated: Appeal Initiated: Appeal Resolved: olation: Activity Location: NY Type: XXS Determined Date: 05/05/2008 Determined by Agency: State Responsible Agency: State	
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Scheduled Compliance Date: Actual Compliance Date: 05/09/2008 RTC Qualifier: DOCUMENTED Sequence Number: 3 Citation Information: Seq # Type Citation 3 STATE REGULATION 372.2(b)(2)(ii)	

^{*} Note: Penalty amount may not reflect all violations cited.

FOIA Report of Non-Sensitive Compliance Monitoring and Enforcement Data

Report run on: April 7, 2016 - 4:01 PM

Page 6

Enforcement: Activity Docket:	ocation: NY	Type: 120 Agency: State	Action Date: 05/13/2008 Responsible Person: NYPDL	Identifier: 001 Branch: R1	
CA Component: N	Disposition Sta	atus:	Appeal Initiated:	Appeal Resolved:	
olation: Activity Location: Scheduled Compliance Da Citation Information: Seq	te:	Determined Date: 05/05/2 Actual Compliance Date: 05/05/2 Citation 373-3.3(g)(1)	are a determined by rigority. Clare	Responsible Agency: 3 SUMENTED Sequence Num	
CEI Evaluation 05/05/ Citizen Complaint: No		By: State	Identifier: 001 Person: NYPDL Not Subtitle C: NO Day Z	Branch: R1 Found Vic ero: 05/05/2008 Focus A	olation: YES
Enforcement: Activity I Docket: CA Component: N	ocation: NY Disposition Sta	Type: 120 Agency: State	Action Date: 05/13/2008 Responsible Person: NYPDL Appeal Initiated:	ldentifier: 001 Branch: R1 Appeal Resolved:	130 A - 27 S 7 S

^{*} End of Report *

Total Number of Activity Locations:

^{*} Note: Penalty amount may not reflect all violations cited.

Description of codes used on the report:

Universes	Description of Universes
Generator	Indicates that the facility is a Large Quantity Generator (LQG), Small Quantity Generator (SQG), Conditionally Exempt Small Quantity Generator (CEG), or not a generator (N).
Transporter	Indicates that the facility Transports waste subject to RCRA regulations. ('Y' indicates that the facility is in this universe).
Operating TSDF	Indicates that the facility is a Treatment, Storage or Disposal facility subject to any type of enforcement. It then specifies the type of facility (L - Land Disposal; I - Incinerator; B - BIF; S - Storage; T - Treatment)
IC in Place	Indicates that the facility has Institutional Controls in place. ('Y' indicates that the facility is in this universe).
El Indicator (HE / GW)	Indicates that the facility has controls in place for Environmental Indicators. HE - Human Exposures ('+' indicates the exposure exists and is under control; '-' indicates the exposure exists and is not under control; 'N' indicates the exposure does not exist) GW - Groundwater Release ('+' indicates the exposure exists and is under control; '-' indicates the exposure exists and is not under control; 'N' indicates the exposure does not exist)
Short-Term Gen	Indicates that the facility is a short term or one time event generator and not generating from ongoing processes.
Transfer Facility	Indicates that the facility transfers hazardous waste.
Offsite Receiver	Indicates that the facility, whether public or private, currently accepts hazardous waste from another site (site identified by a different EPA ID).
HSM	Indicates that the facility manages hazardous secondary material(s) (e.g. spent material, by-product or sludge) that when discarded, would be identified as hazardous waste.
Subpart K	Indicates that the facility has opted into the subpart K laboratory rule. It then specifies the type of facility (C - College or University; H - Teaching Hospital; N - Non-profit Research Institute; W - withdrawal from the rule)
Full Enforcement	Indicates that the facility is a Treatment, Storage or Disposal facility which is part of the Full Enforcement universe. It then specifies the type of facility (L - Land Disposal; I - Incinerator; B - BIF; S - Storage; T - Treatment)
CA Workload	Indicates that the facility is part of the Corrective Action Workload universe. ('Y' indicates that the facility is in this universe).
Active State Gen	Indicates that the facility is an Active State Generator. ('Y' indicates that the facility is in this universe).
Converter	Indicates that the facility is a Converter Treatment, Storage or Disposal facility. It then specifies the type of facility (L - Land Disposal; I - Incinerator; B - BIF; S - Storage; T - Treatment)
State TSDF	Indicates that the facility is a State Treatment, Storage or Disposal facility. It then specifies the type of facility (L - Land Disposal; I - Incinerator; B - BIF; S - Storage; T - Treatment)
State Unaddressed SNC	Indicates that the facility is a State Unaddressed Significant Non-Complier. ('Y' indicates that the facility is in this universe).
State Addressed SNC	Indicates that the facility is a State Addressed Significant Non-Complier. ('Y' indicates that the facility is in this universe).
State SNC w/ Compl. Sched	Indicates that the facility is a State Significant Non-Complier with a Compliance Schedule. ('Y' indicates that the facility is in this universe).
EPA Unaddressed SNC	Indicates that the facility is an EPA Unaddressed Significant Non-Complier. ('Y' indicates that the facility is in this universe).
EPA Addressed SNC	Indicates that the facility is an EPA Addressed Significant Non-Complier. ('Y' indicates that the facility is in this universe).
EPA SNC w/ Compl. Sched	Indicates that the facility is a EPA Significant Non-Complier with a Compliance Schedule. ('Y' indicates that the facility is in this universe).

^{*} Note: Penalty amount may not reflect all violations cited.

Description of codes used on the report:

Code	Description
В	indicates that the handler has filed for bankruptcy and bankruptcy litigation is in process.
С	indicates that all RCRA responsibilities for permitting/closure, corrective action, and compliance monitoring and enforcement at the facility have been formally transferred to the CERCLA program or state equivalent.
F	indicates that all responsible parties (owners/operators) for the handler have fled the country or are otherwise not available for prosecution.
L	indicates that the handler's case is tied up in litigation to the extent that further progress in achieving RCRA compliance through normal enforcement is not possible.

	ER - indicates that the handler has been identified through a source other than Notification and of conducting RCRA-regulated activities without proper authority:
Code	Description
Е	indicates that the handler was initially a non-notifier, subsequently determined to be exempt from requirements to notify.
0	indicates that the handler is a former non-notifier.
Х	indicates that the handler is a non-notifier.

Violation Type	Description
261.A	LISTING - GENERAL
262.A	GENERATORS - GENERAL
262.C	GENERATORS - PRE-TRANSPORT
265.BB	TSD IS-AIR EMISSION STANDARDS - EQUIPMENT LEAKS
265.C	TSD IS-PREPAREDNESS AND PREVENTION
265.D	TSD IS-CONTINGENCY PLAN AND EMERGENCY PROCEDURES
265.G	TSD IS-CLOSURE/POST-CLOSURE
265.I	TSD IS-CONTAINER USE AND MANAGEMENT
273.B	UNIVERSAL WASTE - SMALL QUANTITY HANDLERS
279.C	USED OIL - GENERATORS
XXS	STATE STATUTE OR REGULATION

^{*} Note: Penalty amount may not reflect all violations cited.

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Description of codes used on the report:

Evaluation Type	Type Description	
CEI	COMPLIANCE EVALUATION INSPECTION ON-SITE	
FCI	FOCUSED COMPLIANCE INSPECTION	-

Focus Area CC	Description	
	INCOMPLETE ON-SITE INSPECTION DUE TO CITIZEN COMPLAINT	

Enforcement Description		
WRITTEN INFORMAL		
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^{*} Note: Penalty amount may not reflect all violations cited.

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